

the evolution of the psychological processes and quality of life of individuals admitted in the UEROS-AQUITAINE long-term care in order to improve the understanding of the impact of participating in this program on social and professional reintegration. The objective of the current study, which constitutes a preliminary work of feasibility, is to compare subjects who participated in the neuropsychological section to subjects who participated in the professional section.

Methods Two groups were established: a group met upon admission in the UEROS, in the neuropsychological section (PN, $n = 6$) and a group met in the professional section (PP, $n = 9$). The subjects completed generic scales relative to self-esteem, self-efficacy, depression, coping and a specific scale of quality of life in brain injury patients (QOLIBRI), at two time-points with a 3-month interval. A mixed factorial ANOVA was used to compare values obtained by the groups at the 2 evaluation times.

Results There were no significant differences between PP and PN for self-esteem, self-efficacy and depression. However, PP presented a significant decrease in the "Degree of bothered" concerning quality of life, feelings and physical condition compared to PN. Among the strategies of coping, only the Research for instrumental social support was significantly more used by PP than by PN.

Discussion The construction of an adequate project allows an improvement in certain dimensions of quality of life and encourages functional coping. By the latter, centred on the problem, the subjects appear to seize the support of the multidisciplinary team. This investment could also allow moving away from the pain, to overcome clumsiness and sensory difficulties, becoming then "less annoying". This study intends to be followed by a longitudinal larger-scale research. It will allow specifying the links existing between psychological processes, quality of life and community integration.

Keywords Brain injury; UEROS; Reintegration; Psychological processes; Quality of life

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The synergism between health professionals and users' representatives in the care of persons with brain injuries

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Introduction The synergism between the regional association of brain-injured persons' families (AFTC-LR) and the regional health professionals has a long-standing history in the Languedoc-Roussillon region.

Methods The regional association of brain-injured persons' families (AFTC-LR) has, since its creation, worked in synergism with the hospitals' referents in the field, as much in acute care as in rehabilitation (Montpellier and Nîmes University Hospitals, Perpignan Hospital, Coste-Floret Hospital in Lamalou-les-Bains and Bouffard-Vercelli Centre, in Cerbère), but also in the sanitary, medico-social and social network which intervenes after the rehabilitation care (specialized home in Lamalou-les-Bains, ADAGES, educational institute in Osséja...).

Results This synergism led to the participation of the AFTC-LR in the management of these different departments, in the co-building of the care networks, in the definition of the regional network "brain-injured persons", in many local, regional or national

initiatives (for example: neuro-psychological evaluation for driving licence).

Discussion The definition, within the association, of a medical referent responsible for the relationship with the health professionals allows the development of these different initiatives.

Keywords Health professionals; Users' representatives; Brain injured people

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Prevalence of Traumatic brain injury among female offenders in France. Results of the Fleury TBI study

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Introduction Traumatic Brain injury (TBI) is a serious public health concern. The vast majority of studies about TBI and criminality have included male offenders and little is known about females. That could be explained by the fact that females represent a very small proportion of prisoners. In the general population most reports on TBI also refer to males because they represent 3/4 to 2/3 of subjects who sustained a TBI. This study examines the prevalence of TBI among a population of female offenders.

Aims To establish the prevalence of self-reported TBI in a female prison population, to compare the prevalence of TBI among this population and the general population, and to discuss the possible links between TBI and criminality.

Methods All female offenders consecutively admitted in Fleury-Mérogis prison, during a 3-month period were included in the study. During the routine admission procedure they were interviewed by health care staff. Information and consent were given orally. The questionnaires were completely anonymised.

Results 100 questionnaires were analysed with a population of 88 adult females and 12 juveniles. The prevalence of a self-reported history of TBI was 21%. The first cause of TBI among females was violence related (35%) and the large majority had sustained repeated TBIs. Prevalence of self-reported epilepsy was 6.8% for adult females. Psychiatric care was reported by 11.4% of females. Nearly a fourth of females received anxiolytic treatment (23.9%) whereas 13.6% were on antidepressant treatment. Adult females used more alcohol than cannabis (21.6% versus 12.5%). Daily or regular use of alcohol and cannabis was found in 9.1% and 4.6% respectively.

Conclusion To our knowledge, this is the first study to report the prevalence of self-reported TBI among prisoners in France and in particular among female offenders. As described in the literature, women are at higher risk of TBI from domestic violence. Research in this area should focus on prevention measures.

Keywords Traumatic brain injury; Prison; Epilepsy; Prisoner

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